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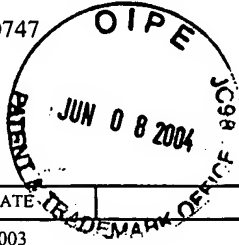
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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02292 7590 03/09/2004

BIRCH STEWART KOLASCH & BIRCH, LLP
PO BOX 747
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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/716,617	11/20/2003	Masaaki Furuya	0171-1041P	6356

TITLE OF INVENTION: PREPARATION OF ORGANOHALOSILANES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/09/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
BARTS, SAMUEL A	1621	556-472000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SHIN_ETSU CHEMICAL CO., LTD.**Tokyo, JAPAN**Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☒ Advance Order - # of Copies 4

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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2448 (enclose an extra copy of this form).

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(Authorized Signature) Gerald M. Murphy, Jr. (Date) 6/8/04
 #28,977

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06/09/2004 CNGUYEN1 00000051 10716617

01 FC:1501
 02 FC:1504
 03 FC:8001

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